

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		10/03/00
O.I.P.E. CLASSIFIER		12	10/10
FORMALITY REVIEW	AM	896	11-02-00
RESPONSE FORMALITY REVIEW	TZ	52947	03/30/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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